LITTLE BLUE BOOK NO. 654
Edited by E. Haldeman-Julius

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Author of "The Caveman Within Us," "Sanity in Sex," "Health and Self-Mastery Through Psycho-Analysis and Autosuggestion," "The Puzzle of Personality," "Autosuggestion—How It Works," "Psycho-Analysis—The Key to Human Behavior," "Rejuvenation—Science's New Fountain of Youth," "Rational Sex Series," etc.

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By William J. Fielding

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WHAT EVERY YOUNG MAN SHOULD KNOW

CHAPTER I.

AT THE PORTALS OF MANHOOD

This treatise is devoted to the senior adolescent—the young man approaching and entering the portals of manhood. It presupposes some acquaintance with elementary biology in general and of sexual theory in particular, as it is essentially a sequel to "*What Every Boy Should Know*," (No. 653 of the Little Blue Books, and Vol. I of the Rational Sex Series).

Therefore, our young friend who reads the present book will find its field of usefulness increased and its value enhanced if he has first read the preceding volume, or some other work that covers practically the same ground.

Every stage of life, for those to whom life has a meaning, is a preparation for Tomorrow. And in order to realize the fullest possibilities of Tomorrow, we must make the most of Today. After all, Today is the great reality for achievement—the time in which we must do our stint. Tomorrow is the ideal we may look forward to for the fruition of some great dream, but we have to work and live for the fulfilment of that dream in the great Today. The idler reverses this arrangement, and prates today of what he is going to do tomorrow. The *manana* of the dreamy Spaniard never comes. It always lies over the fair horizon.

What we are today—the accumulation of our past experiences—is the fruit of days that are gone—the Yesterdays. We are the product in personality and character of these Yesterdays —now memories, but which were dynamic, real and productive when they were called—Today.

All this is by way of emphasizing the influence of the Past over our Present, and the Present over our Future. We cannot control the Past—it is gone. But we can, to a very large degree, control the Present, and through the Present, the Future.

The young man of today is the logical result of the boy of yesterday. He is the forerunner of the man of tomorrow. Therefore, the value of *adequate preparation* in childhood and adolescence is self-evident.

PHYSICAL AND MENTAL DEVELOPMENT

Novalis paid this tribute to the human body: "There is but one temple in the universe, and that is the Body of Man. Nothing is holier than that high form. Bending before man is a reverence done to this Revelation in the Flesh. We touch heaven when we lay our hand on a human body."

The principal factor in the preparation of every individual for life is the development of the body and mind. And the body and mind are so interrelated, and so bound together by all the threads of life, that we speak of them as two objects only as a matter of convenience. In reality there are not two entities; there is only one—the human organism.

The building up of a sound, healthy body, and keeping it fit in every sense of the word,

should be the pride of every young man. Fortunately, the natural, normal instincts of life tend toward that end. The boy wants to be big and strong, and looks with admiration and anticipation upon the finest types of physical manhood in his environment.

The young man is equally ambitious to develop his physical prowess. At this period it has a more tangible meaning to him. It represents the possibilities for achievement, for leadership. He is anxious to excel in some field of activity. And he has long since realized that a fine, strong body is not only an instrument for forging ahead in the realm of athletics and physical endeavor, but that it is a priceless possession which wins the respect and admiration of others.

This gives him prestige, which, if he has developed a sense of social responsibility, as every young man should, implying consideration for others, especially the weak and helpless, will assure a wider social usefulness for his accomplishments.

Mental development, in its broadest sense, is not so keenly sought after by the average youth. There is less rivalry in this direction. This is partly due to the widespread confusion with respect to mental and intellectual problems. There is no mistaking the fact of a strong, healthy body, which has been developed by training, that is, physical exercise and living a clean, wholesome life.

Real mental development is somewhat less obvious—at least, one cannot take a snapshot of it, although it is highly recognizable in a

more subtle way. Then there are differences of opinion, not only about the methods of mental development, but about the end itself.

This is not the time nor place to thrash out the various ideas on mind training. As the subject cannot entirely be ignored, however, in a well balanced treatise on the development of the individual adolescent, I shall only say that the mind should not be neglected in building for manhood.

The mind is not primarily, as some people seem to consider it, a static storehouse or memory vault for the storing away of information or knowledge. This is only a part of its function. Some information becomes obsolete with changing conditions, and we will find that certain "knowledge" we have acquired will have to be discarded, if we wish to progress, in the light of new discoveries.

The principal function of the mind, therefore, is the dynamic one of learning *to think logically and rigorously.* Do not be afraid of changing your mind, if new facts convince you that a former opinion was incorrect. Keep your mind open to all shades of opinion on important questions. The chances are that none are wholly right anyway. So do not accept dogmatic assertions as inviolable truths. Think them over, and consider them, yes. But if it becomes evident they do not and cannot fulfil their alleged purpose, or if they prove a stumbling block to progress, or are illogical, then do not hesitate to discard them for more serviceable products of thought.

EVOLUTION OF LIFE

We can see going on all about us the process of evolution in the individual life. It is represented in the cycle of birth, growth, development, maturity and so on to the completion of its course. The individual comes into the world; he grows; he has to adapt himself physically to certain inexorable conditions, or else he must cease to exist.

The process of the evolution of species, however, covers a vast expanse of time. It is impossible for the human imagination to comprehend the real significance of the immense span of time—the millions and millions of years—it took for the evolution of the simplest unicellular structure into and through the metazoa to their present-day goal in man.

But the story can be read in the open book of nature. Geologists have discovered that there are no remains of back-boned animals in the lowest rocks. The oldest fossil graveyards of the earth are filled entirely with invertebrates, because away back in that remote period of our planet, when these cemeteries were being filled, there were no back-boned animals in existence.

The first inhabitants of this world were the protozoa. *Zoa* is the Greek word for "animals," and *protos* means "first"—thus, *protozoa* means the "first animals"; therefore, the common ancestors of all other animals.

All subsequent creatures have developed directly or indirectly from these primordial ancestors of animal life on this globe. Every animal goes through a series of changes or pro-

cess of evolution before arriving at maturity. Regardless of whether it is a worm, a fish, a mouse, a hippopotamus or a man, it always begins as a one-celled animal—or *protozoon*—a mere microscopic speck. We all go back to the beginning of life.

In Volume I of this series (Little Blue Book No. 653), we described the process of fertilization and development of a number of classes of animal life, and also of vegetable life.

The Law of Recapitulation, or Biogenetic Law, is a useful hypothesis in illustrating the fact of evolution in individual life, and showing the universal kinship of all living things. This law means a certain uniformity which exists from the beginning of life, namely: *Every organism in its development repeats the life history of the race to which it belongs.* For example, every reptile is a fish before it is a reptile; every bird is a fish before it is a bird; every mammal is a fish before it is a mammal.

In the embryonic development of all higher vertebrates, there is a time when they have not only a fish shape, but breathe by gills like fishes and have two-chambered hearts and the peculiar circulation of the fish.

Whereas, fishes have two-chambered hearts, frogs have three-chambered hearts; reptiles have hearts with three chambers and the beginning of a fourth; and birds and mammals have complete four-chambered hearts.

A bird or mammal does not develop a four-chambered heart the first thing. The beginning of the circulatory system of a bird or mammal

is a pulsating tube, as in a worm. Later it acquires a two-chambered heart, like a fish, then a three-chambered heart, like a frog, next the beginning of four chambers, like a reptile, and finally the complete four-chambered heart of its species.

In the developing embryo of the vertebrates —to pass over the lower orders—which begins with the protozoon, it will eventually get a series of bones extending along the back through which runs a nerve-cord with an enlargement at the front end called the brain.

In the case of the frog, it will finally abandon its gills as breathing organs, and develop lungs, and legs and the three-chambered heart, as we have mentioned.

The fishes were the pioneer vertebrates, and all other vertebrates have evolved from them, and so all the higher vertebrates as individuals pass through the fish stage in fulfilment of the biogenetic law. Human beings are no exception to this rule, and go through this process of embryonic development. The human embyro, in fact, is surrounded by a watery substance, the *amniotic fluid.*

All mammals, including man, still carry the birth-marks of their common ancestry from the fish, the amphibian and reptilian species. A chicken of three or four days' incubation has four gill-slits on the side of its neck. In human embyros of three to five weeks' development, these gill slits appear. All reptiles, birds and mammals have them. They serve no function with purely air-breathing creatures, and, except in rare instances, close long before hatching or

birth. In the early stages of all high forms of life the notachord is formed—the dorsal stiffening axis of the lower vertebrates. This disappears as the backbone develops.

It is understood, of course, that because of the rapid prenatal development of the individual—which, in the case of the human being, evolves from the microscopic, fertilized ovum to the completely formed baby in nine months—the stages are not clearly defined nor distinct.

The individual in a few months passes through changes that have taken the race millions of years to undergo. A hundred million years may be as good a guess as any. The individual development, therefore, is not a detailed recapitulation of the racial development, but an outline or synopsis with the various stages largely fused and indistinct.

But notwithstanding the omissions and modifications, the biogenetic law remains as one of the most interesting and significant hypotheses in the whole range of biology.

It is a curious thing that the development of the race from animal ancestry seems to be very distressing to the religious belief of many people. There should be no more repugnance felt over this hypothesis of the origin of the race than over the fact that the individual has a germinal origin.

This latter phenomenon is self-evident, and cannot be contradicted. And the belief in a supernaturally created human being is on a par with the "stork" explanation of the individual origin.

A similar parallelism that exists between the physical evolution of the individual and the race exists between the mental development of the individual and the race. Space will not permit going into the details of the analogy here, but the reader, if interested, will find this subject discussed at length in "THE CAVEMAN WITHIN US."

The value of an insight into these factors of evolution and genetics, in considering the vital aspects of human problems from the young man's standpoint, seems perfectly obvious. One of the important things in favor of a thorough grounding in the subject of sexual phenomena is that it brings one into contact with the vital elements of biology—and helps to make them more interesting and understandable.

CHAPTER II.

ANATOMY AND PHYSIOLOGY OF THE MALE SEX ORGANS

A clear understanding of the structure and functions of the sex organs is, of course, essential to an adequate knowledge of the subject under discussion. While the penis and testes are external organs, and therefore not concealed like the corresponding organs of the female, the young man who has not undertaken the study of the anatomy and physiology of the generative organs of his sex, is in dismal ignorance of their structure and functions. It is this ignorance which has been so highly capitalized by quacks and charlatans to the detriment and undoing of many a youth.

THE PENIS

The *penis*, also called the "membrane virile," is composed of "erectile tissue," or three parts or bodies, bound together by fibrous tissue. Two of these cavernous bodies, or corpora cavernosa, constitute the major portion of the organ. They are situated above the *corpus spongiosum*, a spongy body. The latter has running through it the *urethra*, the outlet both for the urine and the seminal fluid.

The tissue of the penis is supplied with an abundance of small blood vessels, which, under sexual excitement, flood the organ with blood, causing it to become erect. This condition is known as an *erection*. Anything, therefore, that interferes with a free supply of blood to this tissue impairs the physiological function of the penis.

The conical-shaped body at the end of the penis is called the *glans*. This is equipped with delicate nerves of sexual sensibility. There are glands on and near the inside ridge of the *glans penis*, the secretion of which, when proper cleanliness is not observed, may accumulate and become offensive and cause irritation, or even inflammation. Boys and young men should therefore give due attention to the hygiene of these parts, and if the person has a long or tight foreskin, or *prepuce*, special attention is desirable.

The *prepuce* is the skin at the end of the penis which folds over the glans. When it is too long or tight, as mentioned in the preceding paragraph, a slight surgical operation, called *circumcision*, should be resorted to. This

is a fairly common procedure, and among certain religious sects, notably the Hebrews and Mohammedans, it is a traditional practice. In primitive man, who was practically unprotected by clothes, the *prepuce* undoubtedly served a real need, but with civilized man, it is an unnecessary appendage, and it is better removed.

THE TESTES

The testes are two flat, oval shaped bodies, about one and one-half inches in length, enclosed in a sac of skin and thin muscular tissue called the *scrotum*. The average weight of a testicle is about half an ounce. The function of the testes is to prepare the principal elements of the sexual secretion, or semen, of which the most important are the spermatozoa.

The testes are suspended in the scrotum by the *spermatic cord*, which consists of loops of muscular tissue, the *vas deferens*, and blood vessels, all bound together by connective tissue. Usually, the left testicle hangs a little lower than the right one, but the reverse is sometimes the case, and this is not to be considered an unfavorable condition. The veins of the cord are large and numerous and are arranged in a network called the *spermatic plexus*. When these veins are enlarged, the condition is known as varicocele.

The glandular tissue of the testes is composed of a number of lobules, made up of fine tubes, arranged in fibrous compartments. The fine tubes, after their circumvolutions converge into larger ones, and finally emerge from the testicle by connecting with a larger coiled tube, called the *epididymis*. This is the beginning of

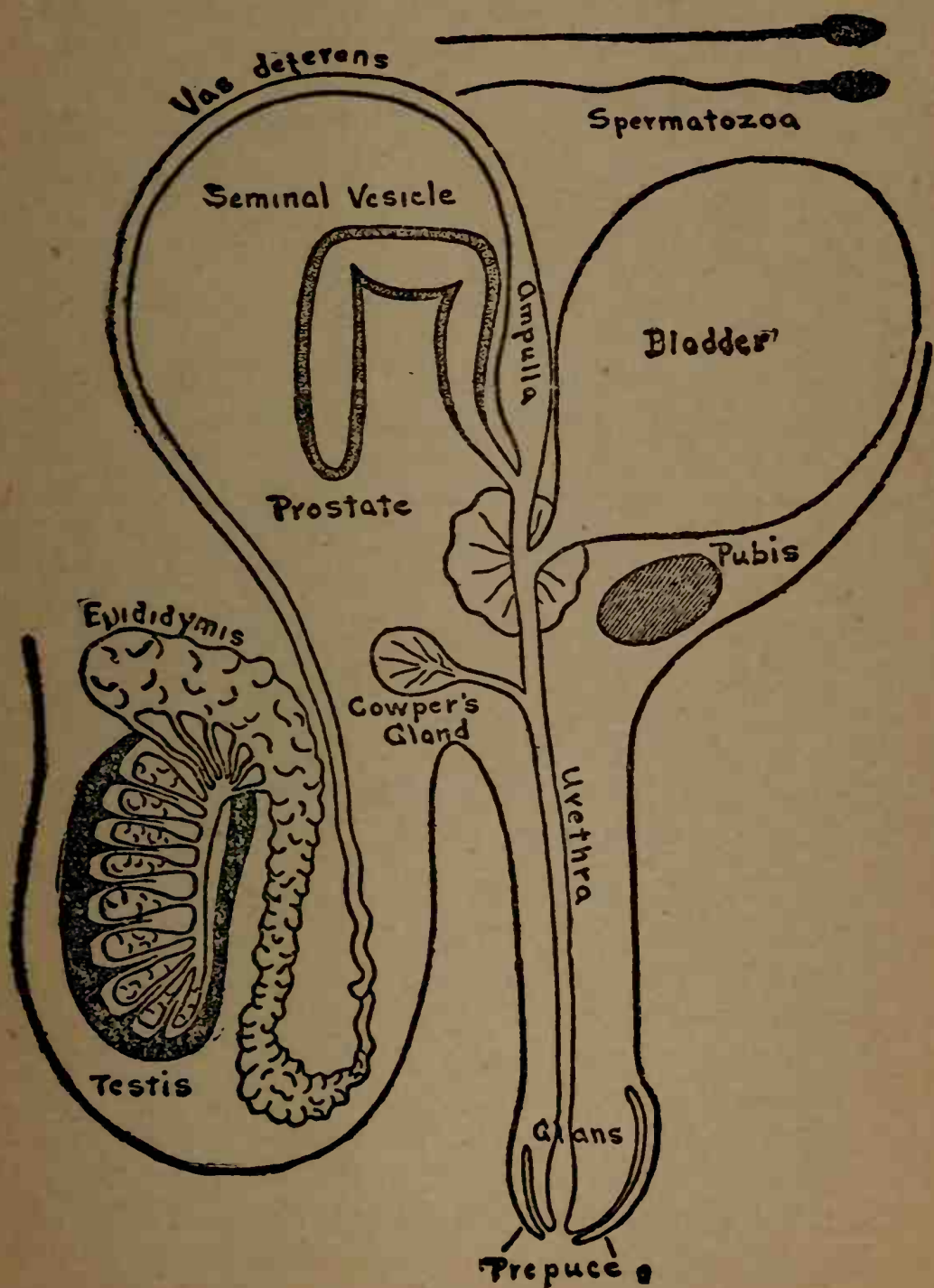
the excretory duct of the testicle, and from this it is continued in a single tube, the *vas deferens*.

During fetal life, while the unborn baby boy is in his mother's womb, the testes develop within the abdominal cavity, just below the kidneys. They gradually descend from this position until, at about the eight month, they pass out of the pelvis and into the scrotum. An arrestment may occur at any point, preventing the testes from descending. Or they may descend after birth. When this occurs, they usually descend during the first week or two, but they may remain up in the pelvic cavity for several months before assuming their normal position. Usually persons with undescended testicles—*cryptorchidism*—are sterile, although some are fertile. The sterility is due, not so much to the position of the testicle in itself, but to the fact that, undescended, it is generally imperfectly developed, and therefore does not secrete properly.

When one testicle only is descended—a condition known as *monorchidism*—the person may be as fertile and as virile as the normal individual with two testicles in the scrotum. Undescended testes may be placed in their proper position by surgery. Sometimes the undescended testicle becomes a source of disease and its removal is desirable.

THE VAS DEFERENS

The *vas deferens*, or *vas*, as it is commonly called, is a single small tube, about two feet in length, running from the *epididymis* upward into the pelvic cavity, forming a long loop,



MALE SEXUAL ORGANS

coming down beside the bladder, where it is dilated into a sack-like structure called the *ampulla*, and finally dipping beneath the base of the bladder, connecting with the *seminal vesicles*. From whence it enters the prostate gland, and connects with the urethra, the exit through the penis, of both the urine and the seminal fluid.

The Cowper's glands, shown in the accompanying illustration, are small, rounded bodies about the size of a pea. They furnish a small quantity, amounting to about a half-dozen drops or more, of a clear, sticky secretion for lubricating the urethra preparatory to the sexual act, or during sexual excitement. The male urethra, it will be remembered, is the outlet not only of the semen, but also for the urine. The latter is acid in its reaction, and as the vitality of tne spermatozoa is impaired by acid of any kind, the alkaline secretion from the Cowper's glands neutralizes any acid that may remain in the urethra, thus protecting the spermatozoa in their exit from the male generative organs.

A few drops of this secretion may appear whenever there is strong and prolonged sexual excitement, even when the sex act is not contemplated. The occasional appearance of this sticky secretion, under sexual excitement, has often caused worry to young men who have not known its significance. They may have been led to believe they were losing a vital fluid, as quacks allege in their lurid and misleading advertisements. They may be told they are subject to "spermatorrhea." It should be emphasized, therefore, that this preliminary

secretion from the Cowper's glands is a natural phenomenon during sexual excitement, and *is not* a sign of disease or debility.

THE PROSTATE GLAND

The prostate is a muscular gland about the size of a horse chestnut, surrounding the urethra at the neck of the bladder. Its function is principally sexual, and the gland is not essential to urination.

The component muscular fibres and structures surrounding the prostate, however, assist in maintaining the closure of the bladder and in expelling the urine and seminal secretion. In a diseased state, the prostate is increased in size, and sometimes causes considerable inconvenience and trouble. *Prostatitis* is a fairly common complaint.

That portion of the urethra which goes through the prostate is known as the *prostatic urethra.* This is a very important section of the tube. In it are situated nerves of urinary desire and sexual sensibility. A diseased condition of these nerves may produce, among its characteristic results, increased desire to urinate, derangement of the procreative function, such as impotence, and other disturbances.

The *prostatic urethra* also contains the openings of the two *ejaculatory ducts* and *prostatic ducts.* There are fifteen or twenty of the latter on each side. On account of the extremely complex nature of this section of the urethra, the seriousness of gonorrheal infection of these parts, when the disease becomes deep-seated, is readily apparent. When the gonorrheal germs —*gonococci*—become lodged in these tissues,

they are extremely difficult to eradicate, and it requires the most expert attention and prolonged, careful treatment to effect a complete cure.

THE SEMINAL VESICLES

The *seminal vesicles* are a pair of lobular pouches situated below the base of the bladder. They serve as reservoirs for the seminal secretion, and also contribute a secretion of their own to increase its bulk.

The *vesicles*, which vary in size in different individuals, are really coiled tubes, with numerous compartments. Each vesicle has a duct which joins with the *vas deferens* to form the *ejaculatory* duct. The *ejaculatory* ducts are about three-quarters of an inch in length, extending upward from the base of the prostate.

THE SEMINAL FLUID

The seminal secretion, or semen, is a whitish, albuminous fluid of a peculiar odor. It contains a number of elements, the most important of which are the*spermatozoa*. These are small, pollywog shaped bodies about 1/500 of an inch in length, with triangular heads and whip-like tails, or flagella. When alive and healthy, they are continually in rapid motion. They can be seen only with the aid of a powerful microscope, and were first observed in 1677. Fertility depends upon the number and vitality of these tiny organisms. It has been estimated that upward of thirty million spermatozoa are given out by a normal healthy man in an ejaculation. The semen is a mixture of

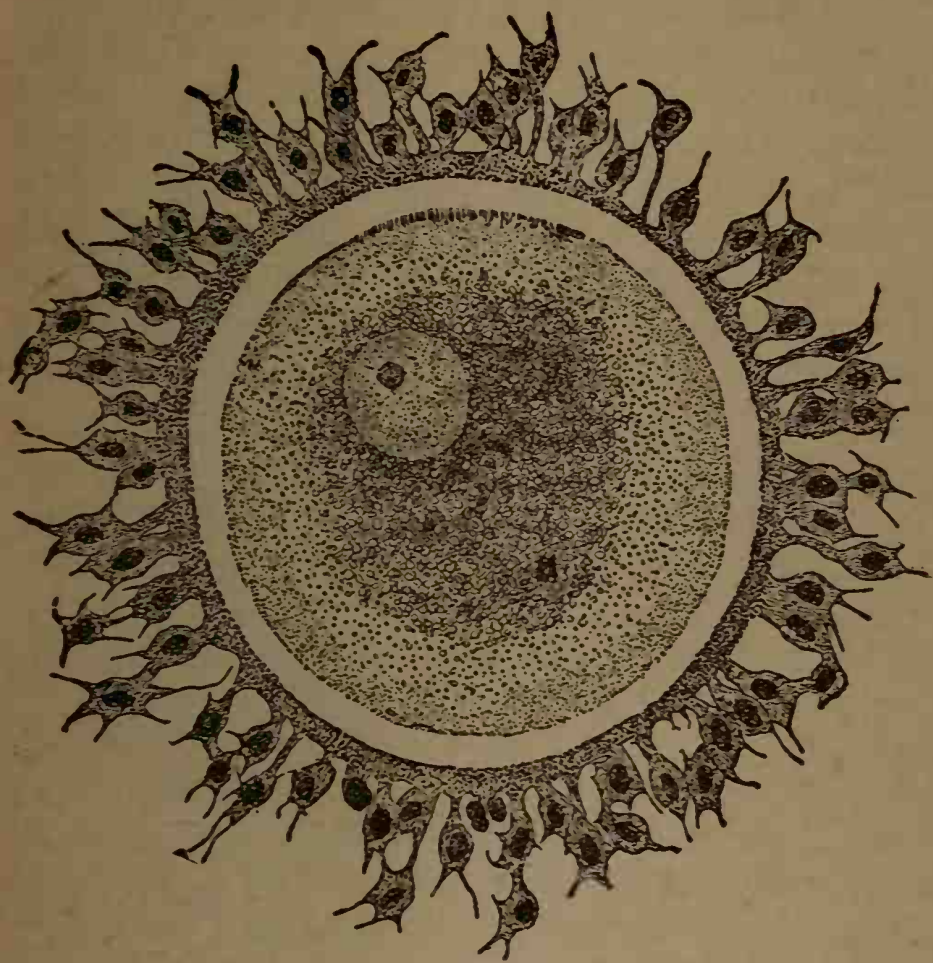
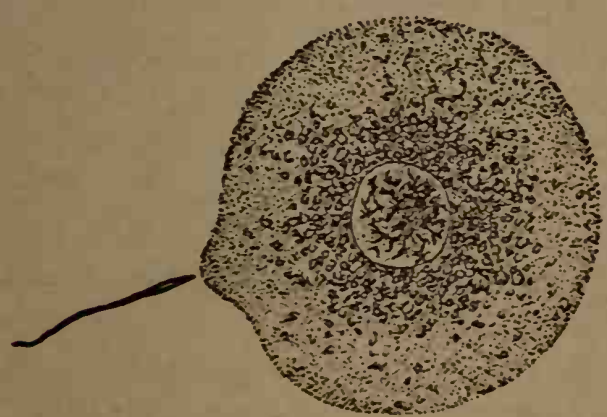


DIAGRAM OF HUMAN OVUM.

DIAGRAM OF HUMAN SPERMATOZOON.



OVUM READY FOR RECEPTION OF SPERMATOZOON.

secretion from three principal sources—the testicles, seminal vesicles and prostate.

From the foregoing, it will be seen that the seminal fluid, which starts from the testes, passes into the epididymis, thence through the *vas deferens* into the seminal vesicles to be stored up for future use. During ejaculation, it passes into the prostate urethra through the ejaculatory ducts, and thence on its course from the penis through the urethra proper.

INTERNAL SECRETION

I have given an extensive outline of the internal secretions of the various glands (endocrines) in No. 648 of the Little Blue Books, "*Rejuvenation—Science's New Fountain of Youth.*" Reference to the gonads, or sex glands, only will therefore be made at this time.

As important as is the seminal secretion, the internal hormone is even more vital to the individual. A man may be sterile—that is incapable of fertilizing a woman—and still be a fine physical specimen of manhood, with an equally vigorous mentality.

A man, however, who lacks the internal sexual secretion (hormone), whether congenitally, through disease, or deprivation by surgical means, loses the attributes of physical manhood and psychic maturity.

As the biblical prophet summed it up in Matthew XIX, 12: "For there be some eunuchs which were so born from their mother's womb, and there be some eunuchs which were made eunuchs of men; and there be eunuchs which have made themselves eunuchs for the kingdom of heaven's sake."

The latter phrase refers to those fanatics who have castrated themselves because of their shame of the sexual organs and their functions. This, as is self-evident to the rational-minded student, is a perverted notion. The feeling of a sense of shame with respect to sex indicates a nasty or perverted mind, instead of a normal, healthy one. It is generally known that St. Francis was one of these self-made eunuchs. It was a common practice up to recent times, to emasculate choir boys of the chapels, so that they might retain their high tenor voices —"for the glory of heaven." Besides the occasional religious fanatic who castrates himself in his demented antipathy to sex, there are said to be small sects in certain parts of the world, among which the faithful are expected to take this course to prove their holiness.

Authorities who have made a special study of eunuchs declare they are generally typified by mental inactivity, timidity, lack of enterprise, selfishness, envy, fanaticism, mysticism —a mixture of childish and neuter-sex traits. There have, however, been exceptions—eunuchs who have risen to positions of importance in army and state.

So we see that the sexual hormone determines the shading of the characteristic masculine development, or lack of it. If the hormone is deficient in quality or quantity, or is absent, the man acquires the secondary physical attributes of the woman, with corresponding mental attitudes. That is, he tends toward narrow shoulders and broad hips, rounded breasts, lack of beard, layers of fat underneath the skin instead

of a more muscular development, a high pitched voice, effeminate features, mannerisms and idiosyncrasies.

Sometimes the sexual organs, or parts of them, degenerate as a result of an accident. Excessive horseback riding may be the beginning of trouble of this kind. Among the Aztecs normal men were made into homosexuals, or eunuchoid types, by subjecting them to strenuous horseback riding. Their generative organs weakened and atrophied; feminine characteristis set in and they became Mujerados, or women-men. (Mujer-meaning "women"). From thence on they assumed female garb and mannerisms, and were consecrated to the religion of the country.

The internal secretion from the gonads is produced in the *interstitial* glands or tissue, meaning "spaces between." These glands are so closely interwoven with the tissue producing the external secretion, however, that only in latter years have they been differentiated; although the double nature of the testes has been known for a long time—since the early experiments in castrating animals and birds.

The *interstitial* glands are made up of small islets of large cells held together by connective tissue and are located between the seminal fluid-producing tubes. These cells are known as the cells of Leydig, from their discoverer.

Whereas the spermatic fluid of the seminal glands is carried out of the body by way of the genito-urinary track, the hormone of the interstitial gland is poured directly into the blood stream.

Although reproduction is impossible without the seminal gland, sex, in every other sense, is completely dominated by the interstitial gland. The interstitial, or Puberty gland, as Steinach calls it, seems to be endowed with a stronger vitality than the seminal gland, for though mild X-ray exposure atrophies the seminal gland, it does not in moderate usage adversely affect the interstitial gland. In fact, the reaction of such treatment, when successful, increases the functional activity of the latter gland, resulting in greater vigor, increased energy, and in elderly people, a state of rejuvenation. On the other hand, there is a certain amount of danger in the X-ray, as an agency for rejuvenation, as its dosage cannot be accurately measured to suit the varying resistance of different people, and over-exposure to the Roetgen Rays will destroy any tissue. If this happens, the damage done is apt to be permanent and far-reaching.

Another function of the interstitial gland is that it seems to insure the nutrition of the seminal gland, and to protect it by neutralizing the various poisons likely to affect it.

The subject of the anatomy and physiology of the female organs of generation is taken up in No. 655 ("*What Every Young Woman Should Know*"), and No. 657 ("*What Every Married Woman Should Know*") of the Little Blue Books—Vols. III. and V. respectively of the Rational Sex Series.

CHAPTER III.

MASTURBATION AND NOCTURNAL EMISSIONS

Masturbation—also called "self-abuse," "the solitary vice," etc.—is one of the most perplexing problems within the whole realm of sex. Perhaps it would not be so perplexing if it were not for the many conflicting notions that prevail on the subject, and the traditional and theological influences that have continued to color a condition that is best judged from a physiological angle.

The term is sometimes used as a synonym for *onanism*, but as the latter is also used to designate another sexual practice, namely premature withdrawal in coitus (*coitus interruptus*), it is clear that a word which means two quite different things is unscientific and should not be used in a general sense.

Nevertheless, because of an incident that is described in the Old Testament, added confusion has been thrown upon a subject which could have been more clearly understood if separated from the prejudices of theology. Onanism is derived from the name *Onan*, son of *Judah* and *Shua*, and grandson of *Israel*. Onan's father, according to Genesis (XXXVIII 8, 9 and 10), wished him to marry his brother's widow and have children by her; but this did not please *Onan*. We shall quote the biblical chronicler:

"And Onan knew that the seed should not be his; and it came to pass, when he went in

to his brother's wife, that he spilled it on the ground, lest he should give seed to his brother.

"And the thing which he did was evil in the sight of Jehovah: and he slew him also."

Onanism is, therefore, from the interpretation of this biblical authority, not masturbation; and we shall not consider the latter practice at all from the standpoint of theological revelation or ancient dogma, but in the light of the best modern knowledge of the human organism.

We shall consider the subject solely with respect to its effects upon the body and mind. Masturbation is performed by friction of the penis with the hand or against some object. Erotic images of women or female sex organs are frequently associated with the act. A peculiar fact about masturbation is that it does not necessarily depend upon a sexual appetite, as such, but may be acquired quite accidentally, as in the case of very young children, or through forming bad habits from contact with undesirable companions.

Small children sometimes acquire the habit from irritation in the regions of the genital organs, due to a long prepuce, or pinworms in the lower bowels, etc.

The practice is not by any means confined to the human race. It is prevalent among animals, notably goats, sheep, dogs, stallions, elephants, camels, stags, and especially man's nearest animal relatives, the *simian* family. It is a common occurrence in zoological parks to observe monkeys manipulating the penis.

Masturbation is a universal, as well as an

ancient, practice. All races and groups, savage and civilized, seem to be more or less addicted to it, as we learn from the observations of the anthropologists.

It is now generally conceded by all modern sexologists that the harrowing results attributed to masturbation by the older school of writers were almost entirely figments of the imagination, stimulated by an unwise zeal. When occasionally very injurious mental results occurred, they were due rather to the fright and shock sustained from the dire predictions than from masturbation itself.

Probably the worst results, when there are injurious results, are due to over-indulgence in a habit that may be practiced with little difficulty. Thus, it causes a drain on the system of energy that should be constructively used, and influences adversely the tone of the nervous organism and retards the development of the body as a whole. This is particularly unfavorable in the case of young, immature boys, as it is apt to interfere with the fullest development of the powers of manhood.

It is also apt to give the one who practices it, if he be sensitive, a feeling of moral guilt, with a tendency to shun the society of other people. Thus, the person becomes isolated and unadaptive, which is a serious handicap to a young man's career.

Eliminating all ridiculous scares and unwise threats, the right-minded boy or young man will see for himself the desirability of refraining from masturbation. If he has formed the practice, then he will, as a matter of self-respect

and for the good of himself and his future, discontinue it and at the same time cultivate habits that will develop and strengthen his body and character.

The natural tension of the sex organs, which in young manhood is a normal manifestation, will relieve itself more or less automatically in the form of nocturnal or night emissions, which will be discussed later in this chapter.

In the case of parents or guardians who wish to break the habit in children, it is the worst thing in the world to deal harshly with the child when he has been found to practice masturbation. This tends, especially with a sensitive child, to emphasize the subject in his mind out of all proportion to its importance. And it may cause an indelible morbid complex on the subject of sex, which will haunt the individual throughout life. It is better to treat the child gently and explain in a kindly way that the fine manly type of boy, when he understands its significance will not indulge in this practice after it has been brought to his attention. It is desirable in developing the highest type of manhood, to which all normal boys aspire, not to handle the sex organs, except in the bath or when urinating, and never to play with or abuse them. The subject should not be over-emphasized in the mind of the child by making masturbation more important than it really is.

With respect to masturbation in fully developed men, who for various reasons are unable to satisfy the sexual impulse in the nor-

mal manner, the following observations of well known authorities will be of interest:

Dr. William J. Robinson, in *Sexual Truths*, states: "The evil results of masturbation have been shamefully and stupidly exaggerated, and in the vast majority of cases masturbation leads to no disastrous results, and it is better for a man who cannot satisfy his sex instincts naturally to indulge in occasional masturbation than to fight day and night with his thoughts and to use up his strength in mastering his desires."

Sir James Paget, an eminent English surgeon, wrote: "Masturbation does neither more nor less harm than sexual intercourse practiced with the same frequency in the same conditions of general health, age and circumstances."

Another English author, Menzies, is quoted as follows: "Modern, clinical psychology has, for instance, definitely established the fact that autoerotism in one form or another, is a normal and quite universal phase of human development, and not, as used to be thought, an abnormal perversion of the sexual instinct."

Professor August Forel, the famous authority of Zurich, Switzerland, committed himself thusly (*The Sexual Question*): "The effect of moderate masturbation in the adult has been greatly exaggerated, either by confounding the effect with the cause, or for mercenary objects, by driving timid persons to charlatans or to prostitutes."

With regard to the suggestable influences that assert themselves in masturbation, we might quote Dr. A. A. Brill, the psychoanalytic

authority: "The patients are terrified by reading quack literature, and, I regret to say, by uniformed doctors. They are threatened with paralysis, paresis, consumption of the spine, insanity, etc. *and as a result they become depressed. hypochondriacal and self-conscious.* But as soon as they become convinced that they are not doomed, and that masturbation cannot cause insanity or other dreadful maladies, they soon lose their symptoms. Nor must it be imagined that robbing masturbation of its terrors encourage the practice. On the contrary, I have found that as long as the patients dread it and struggle against it, they masturbate twice as often as when they become convinced that it has none of its supposed terrors."

NOCTURNAL EMISSIONS

Nocturnal, or night emissions, also colloquially called "wet dreams," are natural occurrences from, or soon after, the beginning of puberty. Because of the general lack of understanding of sexual phenomena, these emissions have been greatly misunderstood, and the first experience of this kind has terrified many a boy.

The late Dr. G. Stanley Hall, for many years president of Clark University, and one of the very ablest of American psychologists and authorities on adolescence, brings out in the most graphic manner, the mental anguish which may accompany a misunderstanding of this subject.

Dr. Hall in his "*Life and Confessions of a Psychologist*," a monumental work of over six hundred pages, gives his experience while a

young man attending school and college nearly sixty years ago:

"For a long time if I had any physical excitation or nocturnal experience I was almost petrified lest I was losing my brains and carefully examined the bridge of my nose to see if it was getting a bit flat. I understood that anyone who swerved in the slightest from the norm of purity was liable to be smitten with some loathsome disease which I associated with leprosy and with the 'unpardonable sin' which the minister often dwelt upon.

"So great was my dread of natural phenomena that in the earliest teens I rigged up an apparatus and applied bandages to prevent erethism while I slept, which very likely only augmented the trouble. If I yielded to any kind of temptation to experimentation upon myself, I suffered from intense remorse and fear, and sent up many a secret and fervent prayer that I might never again break my resolve. At one time I feared I was abnormal and found occasion to consult a physician in a neighboring town who did not know me. He examined me and took my dollar, and laughed at me, but also told me what consequences would ensue if I became unchaste. What an untold agony of soul would have been saved me if some one had told me that certain experiences while I slept (nocturnal emissions) were as normal for boys in their teens as are the monthly phenomena for girls. I did not know that even in college and thought myself secretly and exceptionally corrupt and not quite worthy to associate with girls."

Here was a brilliant student who, even right into his college years, suffered untold anguish because of his utter ignorance of noctural emissions and other natural sexual phenomena. Fortunately, we have made considerable strides in the past half-century in this respect, as it is hardly probable that a young man with the means of securing information that a college youth has at this time, would now have occasion to suffer this torment.

However, there are still countless boys and young men without the means of obtaining knowledge that is available to the advanced student, who are sorely troubled by their unenlightenment on this question.

Let the young man, therefore, rest assured that occasional emission at night, ordinarily from two to four a month, are perfectly natural and to be expected. They indicate that the sex organs are now nearing maturity; that they are capable of preparing, and are preparing, the seminal fluid. This secretion gradually accumulates, and when the vessels of the sexual apparatus described in the preceding chapter become full, there is a tension which is relieved by an involuntary act of emptying (the night emission).

The young man may wake up in the night and for the first time find that he has had an emission. If he is unprepared for the event, the discharge of the sticky secretion will undoubtedly frighten him, and may prove a source of worry that will be extremely depressing.

Being forewarned of the occurrence, however, he will immediately recognize it as a

definite sign of approaching manhood, and instead of feeling alarmed, will rest reassured and content in the knowledge of his new status of evolving manhood that this event implies. It is the worrying over the situation which causes depletion of vitality, loss of appetite and a general feeling of ineffectiveness.

The amount of secretion and also the frequency vary with different individuals. If an emission occurs very early, or at the onset of puberty, the amount may be small. In a fully developed man, it may be copious. The frequency usually ranges from two to four times a month. It may, however, be either more or less.

Quacks and unscrupulous doctors have made the most of these occurrences by advertising to cure "lost manhood," "nervous debility," etc. The cunningly written advertisements have been deliberately worded to refer to nocturnal emissions, and have secretly terrified many an uninformed youth who has associated the extravagantly illuminated and misrepresented symptoms with his own experience. The educational campaign of recent years against the venereal quacks and so-called "specialists" in *men's diseases*, has been one of the important milestones of progress of our time.

One's diet may influence the amount and frequency of the emission; as also will one's mental habits. The eating heavily of proteins —eggs, meats, game, fish, etc.—and rich, heavy foods, will cause an increased amount of secretion, and, of course, necessarily a more frequent relieving of tension by an emission.

If the young man permits himself to dwell upon erotic fancies or sexual thoughts this will reflect itself in erotic dreams often accompanied by an emission. The too frequent occurrence of this night discharge will impress the thoughtful youth with the advisability of revising his mental habits, turning them into channels less erotic or sexual in character. This mental reorientation is best accomplished by directing the thoughts into broader, impersonal fields, and engaging in physical activities, athletic pursuits, etc. The diet might be modified, too, by cutting down the meats, eggs and other proteins, and eating more liberally of fruits and fresh, green vegetables. This will also promote the activity of the bowels. One should not lie on his back, as this unnatural position is conducive to nocturnal emissions, particularly when the bladder is distended, causing it to press against the seminal vesicles.

There are some men seemingly virile and leading continent lives who appear to have no nocturnal emissions. At least they have no actual discharge of semen, but whether the excess secretion escapes in a more subtle and inconspicuous way cannot positively be stated. It is possible that a man who is extremely temperate in his diet will secrete the seminal fluid very slowly, and it may be absorbed or eliminated in small quantities during urination. So if a man is otherwise normal and healthy, and does not consciously experience nocturnal discharges, it is no cause for alarm.

Diurnal, or day, emissions, are sometimes

experienced instead of noctural discharges. When they occur, it is usually a reflex mechanical process, taking place at the time of a passage of the bowels, and perhaps caused by the muscular action of the pelvic regions upon the vesicles. This form of emission is comparatively unusual, but of the same significance as the noctural variety, and should occasion no concern.

CHAPTER IV.

THE VENEREAL DISEASES

The venereal diseases, of which the most important are gonorrhea and syphillis, are among the most prevalent of all the ailments that plague mankind. They are highly infectious, exist in every section of the world inhabited by human beings, and are the source of untold misery and far-reaching pernicious results. It is therefore essential that the young man be informed as fully as possible about the characteristics of these maladies.

It is becoming more and more recognized that an open, above-board discussion of this subject is the very best safeguard for the moral and physical health of young manhood and young womanhood. People are less apt to make mistakes when they understand conditions which are to be confronted at every hand; and if they do make a mistake, they are better able to rectify the error if they have a clear insight into the problems in which they are involved.

There has been a tremendous amount of ignorance, and what may be called misinforma-

tion regarding the venereal diseases right down to the present time. By this, I mean there has been an immense number of people who knew practically nothing about them, which often became a calamity when any of them contracted one of these diseases, whether innocently or otherwise. Then there have been many others, particularly young men, who knew a great deal about these diseases which *was not so.* This condition was sometimes as bad in its effects as the state of mind that didn't know anything.

In the not remote past these ailments have had applied to them the absurd term "social diseases" and "unmentionable diseases." The latter designation has certain implications which cast a glamor of romance over the situation. Anything "unmentionable," of course, must be interesting. This has been characteristic of our traditional treatment of the sex question. As a matter of fact, anything relating to sexual phenomena has been "unmentionable"; hence the morbid and unhealthy interest that has been shown in the subject.

GONORRHEA

Until 1879, when Albert Neisser, a German scientist, isolated the gonorrheal germ—*gonococcus*—the symptoms of gonorrhea and syphilis were widely confused, even by the medical profession. This was due to the fact that many sufferers from gonorrhea also had syphilis, and the characteristic symptoms of the latter were attributed to the gonorrheal infection.

As an illustration of this, in the year 1767, John Hunter, a daring English surgeon experi-

mented upon himself by taking some discharge from a man with gonorrhea and putting it under his own skin. The man had syphilis as well as gonorrhea, and Dr. Hunter, in due time breaking out with syphilis, naturally concluded the diseases were identical. This confusion prevailed more or less down to the time of Professor Neisser's discovery.

The microbe of gonorrhea belongs to the *coccus* group of bacteria, in which the organism is not rod-like, as are *bacilli*, but rounded; hence known as *gonococcus* ("kokkos" is Greek for berry). The *gonococcus*, as well as bacteria of most other infectious diseases, such as tuberculosis, cholera, plague, typhoid fever, etc., are vegetable organisms of the lowest group of that kingdom.

The germ of syphilis, on the other hand—the *spirochaeta pallida*, or *treponema pallidum*—like that of maleria, is a protozoon, and belong, therefore to the lowest group of the animal kingdom.

Gonorrhea, vulgarly called "the clap," "a dose," etc., is a very ancient disease, and if less disastrous in its effects than syphilis, it is to be regarded seriously. The old saying of a generation or so ago that "gonorrhea is no worse than a bad cold," is now thoroughly discredited.

If the disease gets a start and becomes enmeshed in the complicated passages and tissues of the genital regions, then only by thorough and prolonged treatment will the danger of infecting others be overcome. In fact, under these circumstances, it is often dif-

ficult to determine whether or not all seats of infection have been eradicated. There may be long periods of latency, which in rare cases may be years in duration, and then when the vitality becomes low, reducing the constitutional resistance, the old and perhaps forgotten disease will break out again and become active. In this way the contagium may be passed on unwittingly before the individual realizes he has suffered a relapse.

Many men, thinking themselves cured and then marrying, have later infected their wives. This sometimes results in bitter recriminations as well as physical suffering from the disease. It may happen that a man will in this way infect his wife, without experiencing any symptom himself, and she in turn will pass on to him an active or virulent case of gonorrhea. Many a woman has thus been accused either of having contracted the disease before marriage, or of being guilty of infidelity after marriage, and picking up the infection in this way.

While the usual source of infection is in the sexual act, it may be acquired by handling or coming in contact with objects which had been used a short time before by diseased individuals. As the mucous membranes are the primary seats of infection, gonorrhea may be acquired not only in the sex organs, but in other parts of the body where the mucous membranes are exposed. The eye is particularly susceptible if the germs are carried on the hand to that organ, and acute inflammation or even blindness may result.

Carelessness on the part of attendants in hospitals, asylums, etc., particularly institutions where young children are lodged, sometimes results in an epidemic of genital gonorrhea. It may start by the use of an infected sponge or syringe, and the discharge from one individual is then carried on bed sheets and clothes or by personal contact to others.

The first symptoms usually assert themselves within three to five days after contact with the germs, although it may be a week or two. There is first an itching and a sensation of warmth in the opening of the urethra or urinary channel. A scalding or burning sensation upon urination soon follows. This is followed by a discharge, at first thin and watery. It later becomes thick, yellowish or greenish, and in severe cases streaked with blood.

As the disease travels back into the urinary canal and inflames the tissues of the internal genital regions, the pain on passage of urine becomes intense, sometimes causing the sufferer to swoon with the agony. Male patients are frequently disturbed in sleep by the penis becoming hard, bent and painful.

In ten days to two weeks, the more outstanding of these symptoms have subsided, and are no longer annoying. However, the discharge still continues, but in a month or six weeks becomes thin and watery again. In the course of time, it disappears entirely, or else keeps up indefinitely in the form of a thin, milky fluid, called gleet."

A not unusual result of gonorrhea in the

male is known as "stricture," of varying degrees of intensity. This is caused by a contracting of the diseased urethra. As a result of the inflammation, little scars form, further closing up the urinary channel, so that it becomes increasingly difficult to urinate. Perhaps the urine may come drop by drop, or there may be a complete stoppage of the passage. As the bladder grows more and more full, and causing agonizing pain, it will, if not emptied, burst into the abdomen. When treated in time, the contracting channel can generally be stretched by the use of instruments in the hands of a competent physician. If the condition gets out of hand, however, it becomes necessary to use a knife and cut through the obstruction.

But as far-reaching as are the possible results of gonorrheal infection to the individual sufferer, the racial effects are even more serious.

Dr. Prince A. Morrow, one of the pioneers in the great progressive campaign to deal in a sane, rational way with the venereal diseases, and the father of our organized sex educational movement, had this to say on the subject:

"The racial danger of gonococcus infection is especially manifest in its sterilizing influence upon the procreative capacity of both men and women. Statistics show that fifty per cent, of infected women are rendered permanently and irremediably sterile. The proportion of non-premeditated childless marriages, due to the husband's incapacity from this cause, is estimated at from seventeen to twenty-five per cent.

'One child sterility,' as it is termed, where one child represents the total productiveness of the family, is in many instances traceable to this infection. In addition, it is a frequent cause of abortion. Contrary to the popular view, much of the sterility in married life is from incapacity and not from choice."

Dr. John H. Stokes, head of the department of Dermatology and syphilology at Mayo Clinic in Rochester, Minnesota, expressed himself in the following manner:

"Gonorrhea in women is the most embittering and tragic aspect of the disease. The overwhelming proportion of infections are innocent. A man has a chance, at least, to know what ails him. The woman, in the existing state of popular and medical sentiment, is lied to at every turn of the way. Gonorrhea is a serious enough diseases in men. In women it may be a disaster. Gonorrhea is usually curable in men. In women, while the disease, if taken in time, is curable, the problem is much more difficult. In women in general, gonorrhea may run, on the one hand, a course so mild that although virulently infectious, the woman may never realize she has the disease; on the other hand, it may reduce her almost at once to a pitiable invalidism, or cost her her life."

As previously stated, the mucous membrane of the eyelids is extremely susceptible to gonorrheal infection. As a result many babies have suffered from *ophthalmia neonatorium*—inflammation of the eyes, and finally lost their sight from infection contracted while being born. In the process of birth, the laceration

of the mother's flesh in the genital regions have stirred up old latent or inactive seats of infection, conveying the germs to the baby's eyes. The baby may also be infected shortly after birth from contact with towels, etc.

The part attacked is the *conjunctiva*, the membrane which lines the inside of the eyelids and the front part of the eyeball. It is estimated that upwards of 70 per cent of all cases of *opthalmia neonatorium* is of gonorrheal origin. The fore-dooming of a child to blindness is a terrible calamity. Happily, however, this can be prevented at the outset by the use of a 1 per cent solution of silver nitrate, which is dropped into the eyes immediately after birth. In the majority of civilized countries this is now a legally compulsory practice.

SYPHILIS

Syphilis is the second great venereal scourge from the standpoint of frequency. Considering it in the matter of results, it is more devastating than gonorrhea, particularly to the race. It is sometimes colloquially referred to as "blood disease," "the pox," "syph," etc. Because of the confusion of symptoms with those of gonorrhea, largely on account of the coincidence of the two diseases, it is not known when syphilis first made its appearance among mankind. One school of authorities traces it back in history to very ancient times; while another maintains that it was introduced into Europe at the end of the fifteenth century.

While both groups have important evidence to sustain their contentions, it seems certain that the disease now known as syphilis broke

out in Europe in epidemic form, spreading throughout many countries shortly after Columbus returned from his first voyage to the West Indies in 1493. In the following year, the new (?) disease ravaged Spain and Italy. The prevalent belief therefore was that syphilis had been imported by the crew of Columbus.

In 1495 the disease attacked France and Germany; in 1496 it invaded Holland and Greece; in 1497 it found its way into England and Scotland; and in 1499 it raged in Russia and Hungary.

When Charles VIII of France returned to Paris from Italy in 1495, his soldiers brought with them the "Neapolitan disease," as they called it for the want of a better name. It spread so swiftly in France that it soon became known as the "French disease," which term clung to it for a long time. Both of these designations were used by Shakespeare in referring to the disease.

The germ of syphilis was identified in 1905 by Fritz Schaudinn, a gifted young zoologist of Germany, who had done notable research work with microscopic forms of animal life. He was aided in his investigations by Dr. Eric Hoffmann, a well-known syphilologist of Bonn.

The microbe of syphilis, as we have observed, is an extremely small animal organism or *protozoon*. From its pale and spiral characteristics it is termed the *spirochaete pallida*; and also as the *treponema pallidum*.

Syphilis is highly infectious. There must be actual contact between the exudation of a sufferer, wherein the germ is present, and the

skin or mucous membrane of the person contracting the disease. The contact, however, may be indirect. The contagium may be acquired from a contaminated object instead of by actual contact with the person of the afflicted.

In all cases, apparently, of both direct and indirect contact, the germ, in order to infect, must enter one's system through a breach of the skin or the mucous membrane. In the former case, however, the breach in the surface of the skin may be so slight that the individual himself is unaware of its existence.

Most cases of direct contagion are undoubtedly of sexual origin; but the disease is often communicated by kissing. It is also disseminated in numerous other ways, such as by nurses who suckle syphilitic infants, and physicians, nurses and midwives who handle syphilitic patients and unknowingly contract the disease and pass it along to others, perhaps to members of their own family.

Many cases of syphilitic contagion from kissing are recorded. A man may have a syphilitic sore on his lip and, not knowing its nature or infectious character, kisses his sweetheart or wife or child, and if there should be a tiny crack or abrasion of the lip of the person kissed, the disease may be communicated.

Dr. Schamberg of Philadelphia, in the *Journal of the American Medical Association*, reports an unusually striking instance. A group of youths and girls, ranging in age from sixteen to twenty-two, joined in a game in which the forfeit took the form of a kiss. One

of the youths, who had a syphilitic sore on his lip, infected six girls whom he kissed, as well as a seventh whom he had met at another party. A young man of the party was apparently infected by kissing one of the girls while the contagium was fresh on her lip.

Among the prominent mediums of indirect contagion are public towels, drinking cups, wash basins, toilets, brushes and combs, forks and spoons, wind instruments, pipes, razors, etc. The desirability of avoiding contact with public objects of this sort, that have been used by other persons, is therefore obvious.

When infection takes place, excepting in hereditary syphilis, no matter how, the disease follows much the same course, unless prompt and effective treatment cuts it short. At the seat of infection, after a lapse of from three to six weeks, more or less—known as the incubation period—a sore appears. This is called the primary sore, or hard chancre, to distinguish it from the lesion of soft chancre.

It is not usually painful, and its nature may not at first be suspected. As it generally has a hard base, it may be slow to heal, and the nearest lymph-glands become sore and swollen. After some days or a few weeks, the primary sore usually heals; but in some cases they ulcerate, and when it does, notwithstanding diligent treatment, it may cause considerable destruction of tissue.

If the disease is left untreated at this stage, or is ineffectually treated, the second stage follows. This makes its appearance a few weeks after the primary sore in the form of a skin

rash. It may imitate almost any known form of cutaneous (skin) disease, and it is therefore often confused with other disorders. As the disease is now constitutional, and spread throughout the body, it affects the lymphatic glands, causing them to swell, producing inflammatory affections of the bones and joints, the arteries, nervous system, and the eye, etc.

This is a stage when the patient is liable to infect others by contact with the saliva, secretions, mucus or blood from any part of the body, as his system is rampant with the active germs. In the primary stage, it is only the sore that is infectious.

The tertiary (third) stage may not come about for several, and sometimes many, years. By this time, the subject may have long since believed himself cured, so a diagnosis of syphilis will be a shocking surprise to him. Among the symptoms at this stage is a process of slow inflammation, resulting in the formation of swellings (gummata) on the skin and mucous membranes, the bones, the nerves and any of the organs.

Whereas the lesions of the secondary period tend after a time to spontaneous healing, those of the tertiary period are more chronic and tenacious and yield less readily to remedial treatment. The damage done to the bodily structures at this time, even if the syphilitic germ is finally conquered, is quite permanent.

Dr. Morrow, who had wide experience in the observation and treatment of syphilis, expressed himself as follows in regard to its hereditary traits:

"Syphilis is the only disease transmitted to the offspring in full virulence, killing them off outright or blighting their normal development. When the father alone is infected the mortality is about thirty-eight per cent. When the mother also becomes infected the mortality averages from sixty to eighty per cent. Fully one-third of all infected children die within the first six months. Affections of the liver and of the central nervous system figure largely in the causes of mortality. Many of them die from native debility and inaptitude for life, a lack of what may be termed biologic capital. Many of them succumb to slight causes of disease, or die without apparent cause.

"The influence of syphilitic heredity is manifest not only in a defective organization, in lack of vitality, but also in an incapacity of resistance against the germs of disease and inability to recover from its effects. Such children are sickly, constantly requiring medical attention . . . The final result of hereditary syphilis is the inability to procreate healthy children. If the subject of inherited syphilis grows up and marries he is liable to transmit the same class of organic defects to the third generation."

CHANCROID OR "SOFT SORE"

A third and less serious venereal disease is *chancroid*, or soft sore (also called "soft chancre"). The sore resembles that of syphilis somewhat, except that, as the name implies, it is soft instead of hard as in syphilis. Furthermore, whereas the germ of syphilis is an ani-

mal organism, that of the chancroid is a vegetable organism but, unlike that of gonorrhea, is rod-shaped. It was isolated by a French physician over thirty years ago.

The sores are produced by personal contact with an infected individual and appear in a few days after the exposure. Very small abscesses are the first evidence of infection. When these burst, they leave small sores with ragged edges and a yellow discharge. The sores are more or less painful. The most accurate way, technically, of distinguishing them from the hard chancre of syphilis is by microscopic observation, which shows in the former case the vegetable germ.

As it is purely a local affair, the blood is not infected, nor are the organs or tissues of the body poisoned. When the sore heals, the trouble is over, although in the meantime abscesses may form in either or both groins, which are extremely painful and may have to be lanced by the physician.

BALANITIS

A more uncommon type of venereal disease is *balanitis*, or *gangrenous balanitis*. It has only been recognized in more recent years. It also is caused by a vegetable germ—a curved rod with the ends pointed.

It invariably attacks men with long foreskins after cohabitating with diseased women. Small, white sores first form. These gradually increase in size, and are characterized by a profuse, foul discharge. Occasionally, they heal, but more frequently mortification sets in and spreads rapidly. When this happens, con-

siderable destruction of tissue ensues within a very short time. Either the foreskin is eaten away, or the head of the penis, or even the whole organ. With all this destruction there is little inflammation or fever. The treatment is principally to stop the spread of the disease, which is accomplished by slitting the foreskin to allow free access of air, and otherwise employ hygienic methods. This miserable, but comparably rare, malady is primarily a "filth" disease.

After reviewing the venereal diseases and showing the far-reaching results that may attend the most prevalent of them, if inadequately or improperly treated, it should be stated most emphatically that, *if taken in hand promptly*, they can be cured in the great majority of cases. The therapeutics of the venereal diseases are now highly developed and efficacious, and while time and patience are always required, the victim of any of these diseases should *at once* seek the advice of a competent physician. By all means the venereal trafficking quack should be avoided, and if a young man. through misunderstanding finds himself a "patient" of one of this clan, he should drop him as soon as he finds out his mistake.

CHAPTER V.

PROSTITUTION AND OTHER PROBLEMS

Notwithstanding the panaceas of single-tracked minds, prostitution presents an exceedingly complex problem; or, to be more exact, it embraces a group of complex problems.

Some people see only the sexual factors involved. But there are also social, traditional, economic, psychological, pathological and other sides to the question that are of more importance than may be apparent on the surface.

Therefore, to consider prostitution solely as a sexual question is as short-sighted as considering war as exclusively a political one.

Prostitution has been called "the oldest profession," but this is a phrase of irony, as the term "profession" carries a connotation of substantiality and dignity, even though it may be abused.

As a matter of fact, however, the most ancient form of prostitution known was religious prostitution, which did invest its devotee with a dignity it has long since lost. The ancient Egyptians, Syrians, Jews, Greeks Carthaginians, Lydians, Romans, as well as the races of the Orient, had their sacred prostitution, conducted under the patronage of the tribal divinity.

This form of prostitution apparently had a two-fold purpose. First, as a source of revenue for the upkeeping of the temples and the priesthood; secondly, and perhaps emanating from a more primitive period, a means of assuring the introduction of new blood into the intermarrying tribal families, without disregarding the taboo against marrying outsiders. Thus, rather than become exogamous (marrying outside the tribe or family), all single females were required once in a life-time to submit themselves to a stranger.

But the prostitution of the modern world is

far removed from the form we have described. It postulates the lowest degradation of womanhood, the debauchery of manhood and the dissemination of disease—the loathsome venereal diseases which have been described.

From a study of the problem covering nearly a third of a century, Dr. G. Frank Lydston arrived at the following conclusions:

1. Moral measures and religious influences have accomplished much individual good, but have failed to check or even appreciably limit prostitution.
2. Regulation of the evil has failed.
3. Inspection of prostitutes has been pernicious.
4. Segregation fails in its objects and is pernicious in its results.

So-called regulation, inspection and segregation give official recognition to the traffic in womanhood, advertise it, and impart a false sense of security to prospective patrons. Official recognition of any kind may readily be accepted as a tacit endorsement of the evil.

Prostitutes, whether habitual or clandestine, are active carriers of syphilis and gonorrhea, and relations with them should be shunned like a plague. As individuals they deserve the sympathy that is always due the unfortunate. It can not honestly be said that they select their "calling" from choice as normal, adult women. The most of them have drifted into the life of prostitution as inexperienced young girls, often enticed by diabolical male craft and deceit; in many instances reared in surroundings that withheld from them the most elementary

of youth's natural cravings—wholesome play, amusement and emotional outlets, and practically all intellectual opportunities. A considerable percentage are subnormal mentally, and therefore not entirely responsible for their actions. Practically all are the victims of either social, economic or spiritual deprivation; the blighted daughters of poverty—starved in body, mind and soul. Soon they become diseased, emaciated and sodden, hopeless human wrecks and derelicts drifting upon Life's Saragasso Sea.

What right-minded youth, with a knowledge of the hazards of prostitution, will jeopardize his health and happiness, possibly his career, and the welfare of his future wife and children by consorting with these unfortunate diseased travesties of womanhood?

Let us sympathize with the prostitute; and we must despise the ill-advised militant crusader who, with savage vindictiveness in his heart, seeks to eliminate prostitution by spectacular raids upon these girls and women; often driving them out into the cold without shelter or food, as a mere gesture at an ancient evil, and without the remotest idea or intention of getting down to the basic causes of the corruption he would superficially brush away.

The person of the prostitute is a breeding-ground of disease and misery, and the institution of prostitution is a cesspool of vice and debauchery. Physical and moral contamination is almost inevitably the penalty of contact with either.

Every prostitute may be considered as in-

fected with, or a carrier of, venereal disease. If she for a time escapes infection, disease always stalks in her path, and in the end she rarely gets by without being corroded by disease. The alleged assurance of official inspection, medical examination and segregation is neither a safeguard to the individual against disease, nor a prevention to the community against the spread of moral contamination.

Segregation does not segregate, as has been proven time and again. It is, on the contrary, an incentive where a red light district is tolerated, for private and clandestine prostitutes to come and ply their trade in that locality. Certain cities which have considered they had model red light districts found upon investigation that eighty per cent or more of the prostitutes were scattered through the residential sections. So while one small part of the city bore the label of lust, the rest of the city to a large extent lived up to the reputation of the sign.

This tendency has been observed everywhere. In continental Europe, where segregation has been an official policy by long established tradition, it is even more notable. Abraham Flexner in *Prostitution in Europe*, an elaborate survey, states that 99 per cent of all the prostitutes of Paris live outside of the segregated districts.

The existence of a district where prostitution is under municipal protection makes it easy for new girls to begin a career of commercialized vice. It also offers an opportunity for the most contemptible of all beings, pimps and pro-

curers, to recruit women for sexual traffic and live off their illicit earnings. It provides a constant source of sexual degeneracy and human brutalization which cannot be confined to the districts from which they emanate.

Many weapons have been tried in the campaigns and onslaughts upon prostitution and its handmaiden, venereal disease. Some of these means of offense have been ill considered and cruel and useless. Others have proven more or less efficacious. I believe there is no more formidable weapon to combat prostitution and its concomitant evils than Sex Knowledge in its broadest aspects. This gives a background for the healthy attitude, supplies the reasons why, and takes all the spurious romance and artificial glamour out of vice. Finally, Sex Education means sex control, as well as sex expression in its proper place.

SEX PERVERSIONS AND INVERSIONS

The question of sex perversions and inversions cannot be ignored, without depriving the young man of an opportunity to acquaint himself with these abnormal phenomena. To be forewarned is to be forearmed against contact with these evils. Some people are born with a defective sexual organization (inverts), which may be due to various causes that we cannot enlarge upon at this time. The trouble may be due to imperfect development or malformation of the sex organs, or it may be due to abnormal mentality. Sometimes the latter condition is associated with a perfect physique.

People of this type are commonly called *homosexual*, meaning that their sexual desires are

centered upon persons of their own sex, instead of the opposite sex.

There are other cases where, through associations, individuals (perverts) acquire the vicious habit of engaging in sexual relations with persons of their own sex. Needless to say, this is a despicable practice, and the more so because the pervert invariably seeks to seduce boys and young men to the same nefarious practice.

The young man who is proud of his manhood and who cares for his self-respect, should beware of associating with any male creatures who make sexual advances; and if by any chance he finds himself in the company of this clan, he should immediately part company with them and repel their advance in the most emphatic manner.

Perverts of the lowest type may hang around public places, and by making suggestive signs or by characteristic mannerisms, attempt to attract the attention of young men. A more discreet class of perverts, sometimes of fine physical appearance and intellectual culture, mingle in the best society.

Those homosexuals who are born so afflicted and wish to lead their own lives, without attempting to seduce normal boys and young men, associating entirely among persons of their own peculiar nature, should not be hounded or persecuted because of an affliction that is quite beyond their control.

Sexual perversions of various forms are among the evils of complete isolation of boys or men, such as sailors on long voyages, and the

close intimacies of boys in boarding schools when they have not received rational sex enlightenment which is the best protection against sexual abuses. In the absence of general sex knowledge, one or two boys with perverted tendencies may infect many normal youths.

Dr. G. Stanley Hall, in the work already quoted, substantiates this contention in the following blistering words: "The morals of my first Worthington school were without exception, the 'rottenest' I have ever heard of, although I have for many years been interested in sex perversions and have seen many disgusting revelations of things that went on in reform schools and many other places. Homosexuality, exhibitionism, *fellatio*, onanism, relations with animals, and almost every form of perversion described by Tarnowski, Krafft-Ebbing, or Havelock Ellis, existed in this School."

As the blighting sexual ignorance which prevailed in Dr. Hall's youth has, fortunately, long since become a thing of the past, it is safe to say that the shocking conditions which he describes from first hand knowledge no longer exist in any representative school in this country. There is no more apt allustration of the merit of sexual enlightenment, and by the same token, no better answer to the prurient mind still with us which objects to an honest, straightforward discussion of the nature of ourselves. And how can we discuss our nature and understand our real selves, or protect ourselves against insidious evils, without

a good general knowledge of the phenomena of sex which influence us so profoundly?

We must either be master of the sexual impulses, or be their slave, and modern science has taught us the very important lesson that we cannot hope to master any problem without having a good working knowledge of its nature and manifestations.

IMPOTENCE AND STERILITY

There are two classes of disorders of the procreative functions—impotence and sterility—which may lead to much distress and misunderstanding in the marital relations. Impotence interferes with the physical act of procreation, and may be organic or functional.

Sterility, which means barrenness, or the lack of the capacity of fertilization, may be present with or without impotence. In a great many cases, it is present with full virility. When this happens, the sterility may not be suspected, and in marriage the unproductiveness of the union may erroneously be attributed to the wife instead of the husband's sterility.

The cause of sterility is due usually to lack of vitality or imperfectly constituted spermatozoids, or to some impediment in the man's sexual apparatus. Prominent in the man's causes are gonorrheal infections and inflammations of various sorts which have closed up some of the passages; injury to the testes; diseases of the prostate or seminal vesicles; strictures, degeneration of some of the tissues, and advanced age.

As will readily be perceived, syphilis and

gonorrhea play a large part in the instance of both sterility and impotence. This is equally true of the female, whose sexual organs are subject to disastrous afflictions from veneral diseases.

Impotence is usually a more distressing affliction than sterility, because it prevents normal sexual intercourse, or when attempted, denies both participants the gratification that should normally result from the act of coitus.

As the happiness of marital life is dependent in a large measure upon the sexual function, it is clear that impotence, in any degree, is a serious problem. This form of debility is the cause of much mental anguish and physical derangement, both to the man and woman. Many complicated and long standing ailments can be traced to this source.

This condition, too, has been a fertile field for the quack to exploit. The victim in his anguish will grasp at the last straw to obtain the virility of normal manhood, and the fakir assures him the fulfilment of that which he craves—usually for a large fee. As the charlatan is not in business to affect cures, even if he possessed the knowledge and technique, which he quite invariably does not, the experience can only be a costly blunder.

Fortunately, however, true impotence is comparatively rare. When it does exist, it is usually due to spinal or brain disorder, constitutional exhaustion, or to local genital diseases or disorders which need specific attention. In any of these cases, the removing of the impotence depends upon the cure of the primary

disease or di[illegible] the correction of bad habits, or cons[illegible]ional rehabilitation. If it is incurable, the impotence is likewise incurable.

The treatment for impotence is almost always local and psychic. It is necessary to get the mental state under control, or effect some sort of re-education. Medication is of no use in relieving either impotence or sterility.

PREMATURE SEXUAL INDULGENCE

During the entire adolescent period, the whole organism is undergoing remarkable changes, adjustments and growth. Bones and muscular tissue, and nervous figure are developing toward the fulfilment of manhood.

This development is rarely, if ever, complete until about the twenty-second year and sometimes later. It should therefore be quite apparent that sexual indulgence of any kind during this period of development may be detrimental to the individual.

Sexual practices represent an expenditure of energy. In the normal adult, sexual cohabitation is a natural expression of the mature organism, and satisfies an inherent desire. Under proper conditions, it is followed by a feeling of well-being and contentment. The relaxation of tension in the genital zone which follows the act, is reflected by a state of mental and physical exhilaration, but with a certain sense of languor that is conducive to sleep.

This languid feeling indicates that the body has undergone a decided expenditure of energy, and with the mature organization, periodic experiences of this kind are beneficial. This is in accordance with the natural law that all

instinctive urges of the being should normally find expression—in a manner, however, that inflicts no hardship on any other individual.

As the youth has not yet reached the full stage of his development, sexual indulgence, whether unnatural, illicit or conventional, means a loss of energy—excepting in the natural form of nocturnal emissions—which may interfere with the demands of some part of the growing body, or of the organism as a whole.

Furthermore, sexual practices once experienced tend to become habitual, which unquestionably is harmful to the physically immature youth.

Therefore, continence — non-indulgence in sexual practices—is advisable for the young man, and the self-control and character development in adhering to this principle will be a valuable asset throughout life.

SUBLIMATION

The term sublimation—that is, utilizing sexual energy for purposes of a non-sexual nature—has been very much emphasized and in many cases, perhaps, carried to a ridiculous extent. In mature adulthood, it seems to me that over-sublimation tends to defeat its own ends. That is, complete suppression of the sexual desires in adult life, and the attempt to repress all manifestations of the same, often lead to various forms of nervous disorders, neurasthenia, and even mental derangement.

This is even more evident when the attitude toward the subject of sexual phenomena is such that the individual has a fanatical antipathy

even to the most commonplace thoughts about sex, which he seeks to drive from his harassed and befuddled mind. And incidentally, he uses up all his energy in the struggle with his own conflicts, so that real constructive work is almost impossible. Extreme examples of this sort, fortunately, are not as prevalent as they were in the time when puritanical ideas reigned quite supreme.

In the instance of young manhood, however, there is a place for constructive sublimation, and it can be carried on without fanaticism. In fact, the latter state of mind has no place in well balanced manhood of any age.

The young man is apt to be conscious of a vague unrest and ill-defined longings. His mind will occupy itself more or less with thoughts of sex and love. After all these are but natural and are reflected in his increased interest in young womanhood, whose attractions have begun to appeal to him as never before.

It would be idle to suggest that he suppress these thoughts from his mind. It cannot be done; nor is it desirable. But let him not dwell too exclusively on these trends, and let him shape his ideas of sex and love to conform to the ideal that he hopes and expects ultimately to achieve. They will then be an inspiration, and incentive to right living and wholesome conduct.

Every normal, rightminded young man has set up for himself a goal in life which includes a home, which he plans to share with a woman who means more to him than can be expressed

in prosaic words. By honoring women, and treating them as he would want other men to treat his sisters, he will come to a better realization of the love and companionship of a wife who will embody his ideal.

In order to achieve these aims, there must be sacrifices and self-control. He must make his plans for the maintenance and support of the home he contemplates. This in itself opens up a field of possibilities that can utilize all the surplus energy and thought he can command.

The preparation for the economic, family and social responsibilities of manhood is a problem upon which he can sublimate in the true sense of the word, as he can harmonize his work and his impulses with his ideals and his dreams. It offers an opportunity to put the ideal into the practical, the dream into reality, and the very attempt, sincerely and resolutely made, will be a source of strength and self-revelation.

The world is a very complex organization—full of many wonderful and beautiful things. It also has a side that is ugly, vicious and corrupting. In addition to preparing for the more material responsibilities of adulthood the young man should cultivate a hobby of some kind—something that will develop the sense of esthetics, spiritual idealism, scientific inspiration or other self-developing interest.

Cultivate a love of beautiful things, which will automatically tend to eliminate the ugly and vicious from the scope of one's life.

Activity and harmony are the keynotes to

health and happiness. Keep busy and active, and keep the activities in harmony with the ideals. There is endless opportunity for adventure—particularly intellectual adventure, which is the most desirable kind, because it does not depend upon the limitations of time or material means—by coming in contact with the great and thrilling ideas which are doing so much to reshape the world.

Become a part of this vital universal movement toward the attainment of a fuller life for the individual and by the same token, for humanity as a whole. Start in by making your own life broader and more purposeful. This will both require and give mental activity and alertness. It will stimulate the inspiration to study. It will at once supply the incentive and the impulse to move forward and develop mentally.

When one has cultivated a desire for inquiring into the wonders of life, he will be able to sublimate a great deal of his erotic energies by scientific studies. And today there are many popular presentations of science in its various branches that do not require the knowledge of the advanced scholar to assimilate their wonderful story.

If a young man has an ardent love for poetry, literature and art, there are more opportunities than ever before, both for the gratification of this bent, and for expression. Furthermore, the chances of remunerative activity in these fields, even as a pastime or hobby, are constantly increasing.

At the same time keep active physically, as

a good material foundation is required to assure the best development of the organism in all its phases. Get exercise in the great outdoors. Participate in healthful games and assure a harmonious development of body and mind.

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